

Living With The Memories

Facilitator:

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A Bit About Me

1. Ph.D. in Cognitive Social Psychology, Criminal Justice, and Evaluation Research.
2. Served on faculty at three universities, taught undergrad and grad classes in Criminal Justice, Corrections, Social Psych, and Statistics.
3. Was the 97th person in the world to achieve certification through SANS/GIAC in Computer Security Leadership.
4. Worked with NSA in Berlin during the 1960s hacking Soviet crypto systems.
5. Started as a Probation Officer in August of 1970.
6. Assigned my first Sex Offender in October of 1970.
7. Worked with sex offenders for the past 40 years in almost every capacity within community corrections.
8. Developed the Structured Sex Offender Treatment Review (with Dr. Steve Brake). The SSOTR is in use in numerous states.
9. Sworn staff in Colorado - Cyber Crime Analyst – provide service to Probation/Parole in Colorado – examined over 1,400 sex offenders' computers.
10. Instructor on field computer forensics for APPA, NLECTC, HTCIA, USDOJ, DOD, ICAC and other "alphabet" agencies in the US and Europe.
11. Designed Field Search, a computer forensic program distributed free to law enforcement. Field Search is in use world-wide.
12. Master Trainer for Field Search Instructors.



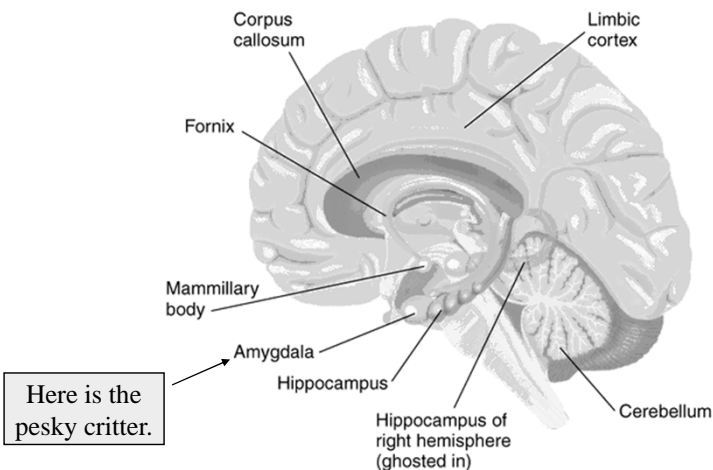
We see and hear things
NOBODY should have to.

No one is immune to these images and stories. Regardless of how many times we deal with them, we can't "numb" ourselves to them.

We can, however, take simple steps which allow us to live with them.

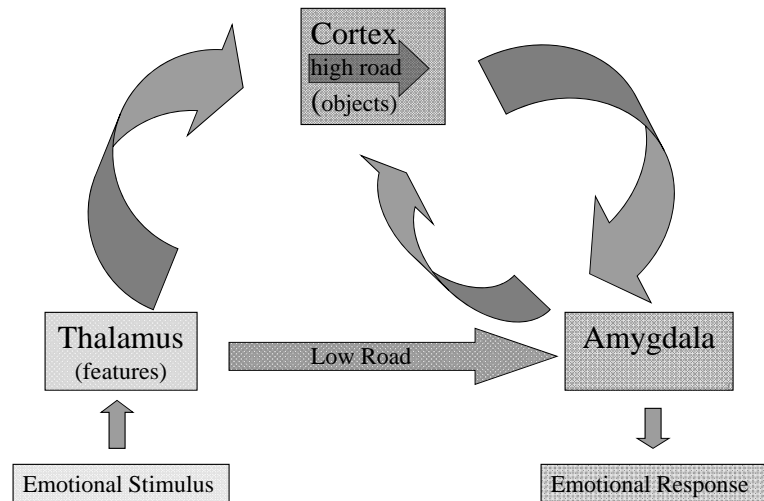
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The Limbic System



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A Quick Note On The Amygdala: Seat of Emotional Learning



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Robert Scaer's Postulate About The "Freeze Response" And PTSD.



2007: Taylor & Francis - Publisher

"Freeze Response": The 'deer in the headlight'; complete inability to move and anesthesia as a result of total helplessness.

"Somatic Discharge": The autonomic completion or 'escape' from the freeze situation. It completes the act of 'escape' and removes the trauma from procedural memory.

"Kindling": application of a critical frequency and intensity results in a permanent change in the excitability of neuronal networks (LPT).

"Dissociative Capsule": Disruption of the present by past procedural memory in traumatic stress.

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It's Not PTSD

1. There has been a lot of research and study on “critical incident trauma” among law enforcement.
2. Much has been written about Post Traumatic Stress Disorder (PTSD).
3. The widely accepted approach for PTSD is Critical Incident Stress Management (CISM).
 1. One-on-one
 2. Defusing
 3. Debriefing
4. What we are going to discuss today is NOT PTSD.
 1. Ongoing – its part of daily life for an examiner
 2. It is secondary trauma – not purely ‘incident’ related.
5. While some of the techniques of CISM may help, it is not the entire solution

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It's Trauma All The Same

1. Can affect emotions
 1. Fear, depression, overwhelmed, irritable, perseveration
2. Can affect physical state
 1. Chest pain, stomach problems, high blood pressure, nausea, headaches, sleep disturbance
3. Can affect your thinking
 1. Concentration problems, confusion, nightmares, weird dreams, fogging.
4. Can affect your behavior
 1. Outbursts, withdrawal, suspicion, increased drinking, changes in eating habits.

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Cognition

You will be playing a game called “Human Camera”.
During this game your assignment is to:

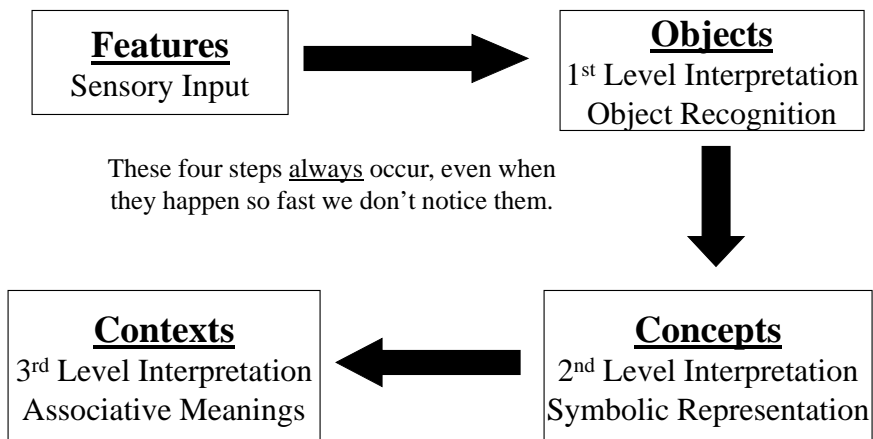
Pay close attention to what is going
on in your mind as you take pictures
when you are the camera.

It happens very fast, so pay close attention!

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KBSolutions
KNOWLEDGE BASED SOLUTIONS

Cognition Simplified



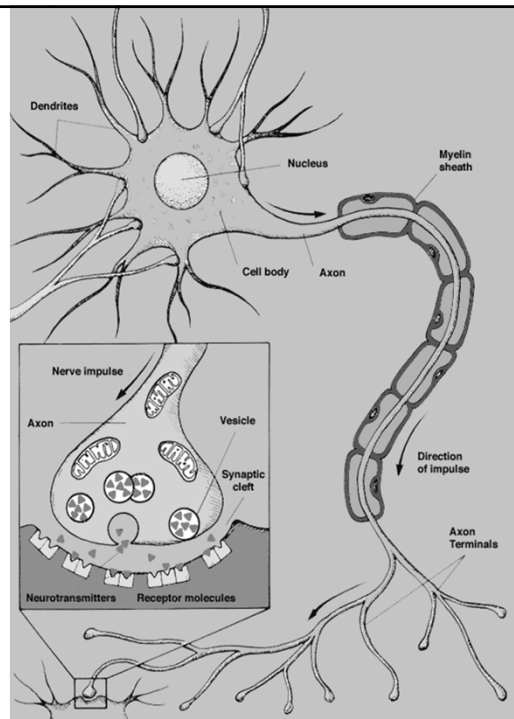
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Things to Think About

1. All thought is symbolic. It is interpreted.
2. Thought is a constellation of neural firings.
3. Neural pathways conform to biology.
4. There is limited plasticity.
5. To change thought, we must evoke **additive** rather than supplantive methodologies.

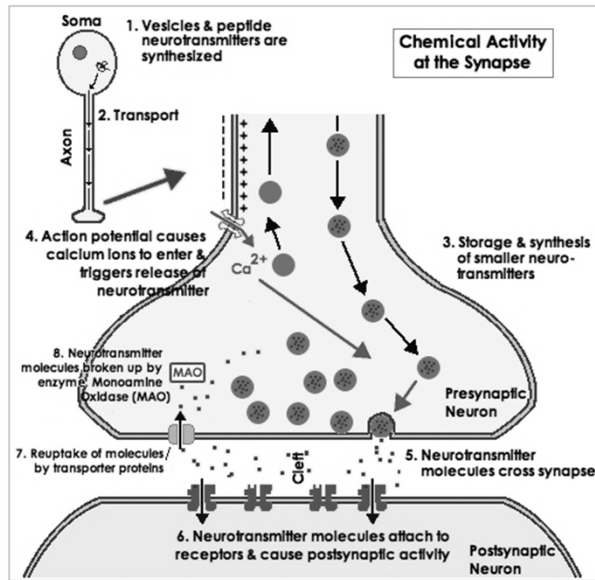
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Anatomy of a neuron.



Neural Synapse

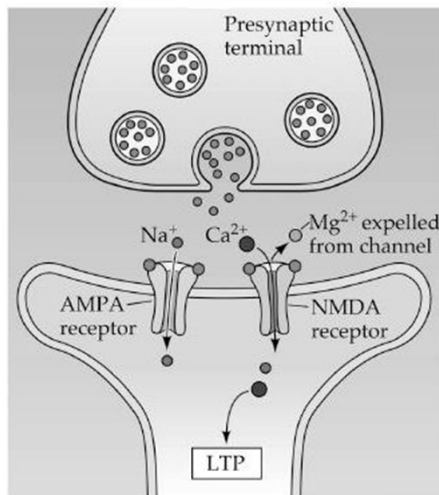
Image Source:
sciencemag.org



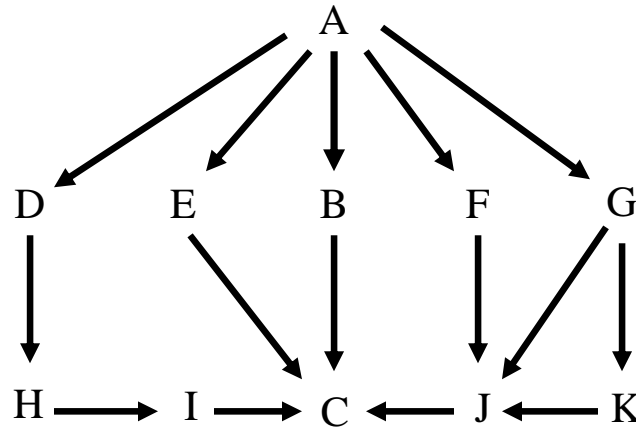
Long Term Potentiation (LTP)

Post-LTP

Image Source:
UCSC.edu



Additive Approach



Now the old trace is masked by all the new traces.
We have a new constellation and a new thought.

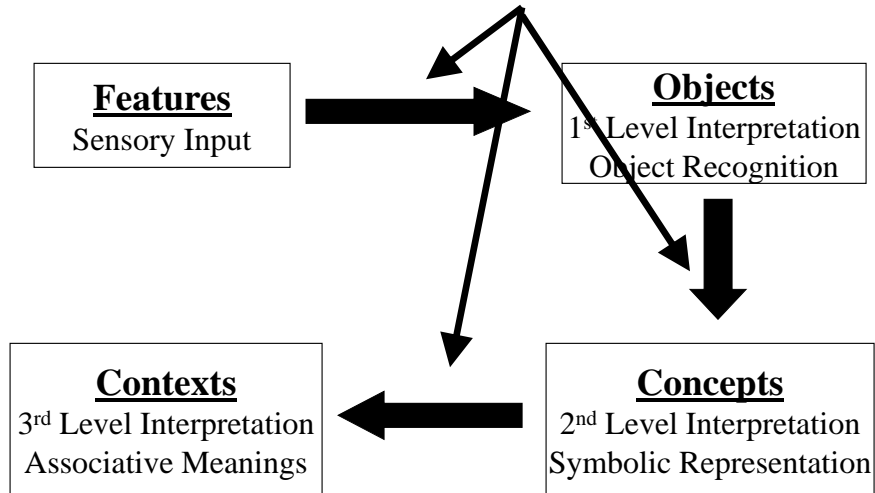
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Here Is The Good News

- Language takes precedence over other forms of thought.
- We cannot ignore linguistic input.
- Lets use this to our advantage.
- We can “drop” things into the stream of consciousness by using language.
- It will be processed...we can't help it.

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We can input ideas



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Thinking and Change

There is a sequence in all behavior:

However, most people think it is:



But it's not. We often miss the internal dialogue portion of our behavior.

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Thinking and Change

There is a sequence in all behavior:

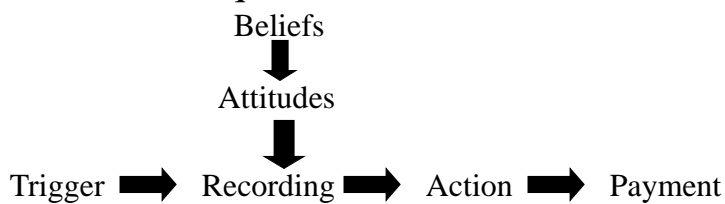
Trigger ➡ Recording ➡ Action ➡ Payment

Our behavior is largely a product of what we say to ourselves. This is especially true of dysfunctional behavior.

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Thinking and Change

There is a sequence in all behavior:



Our recordings are a primarily a result of attitudes we have. Which are a result of beliefs we hold.

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Changing Cognitive Structures

1. Alternation
2. Phased Shifting
3. Frame Shifting

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And So... The Heart Of The Situation.

It is NOT what we see and hear that causes us the pain.

It is what we say to ourselves, about ourselves, that causes us the pain.

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Three Steps to Cognitive Change

1. Identify your recordings
2. Evaluate your recordings
3. Change your recordings

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Identify Recordings

1. Recreate the situation in your mind.
2. Facts – like a camera
3. Don't interpret them, just relate them
4. Ask yourself – What was going through my mind?

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Identify - Step Two

1. **T**olerances – rigid thinking
2. **A**wfulizations – seeing only the dark side
3. **P**utdowns – of yourself or others
4. **E**xtrêmes – ‘never’ or ‘always’, taking things to the extreme
5. **S**houlds – ought, must, have to, need to ...

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Two Dysfunctional Core Beliefs

Power	Worth
<ul style="list-style-type: none">•I am weak•I am out of control•I am powerless•I am a failure•I am vulnerable•I am helpless•I can't get out of this	<ul style="list-style-type: none">•I am unlovable•I am ugly•I am not liked•I am a bad person•I have no value•I have defects•I have no worth

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Evaluating Recordings

1. Is it True?
 1. Is the thought valid, fair, accurate?
 2. Is it fact, or opinion?
2. Is it Logical?
 1. Is the conclusion we jump to reasonable?
 2. Any evidence to the contrary?
3. Is it Helpful?
 1. Is it helpful to dwell on it? (NEVER)
 2. What is the effect of believing it?

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Changing Recordings

It's actually quite simple:

TALK BACK !

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Bottom Line

1. It's NOT the images that get you.
2. It's **what you say to yourself** that gets you.
3. Look for your "I have to..." and "I can't..." statements.
4. Listen to what you are saying to yourself.
5. Evaluate what you are saying.
6. TALK BACK to your dysfunctional dialogue.

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Thank you for your attention.

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